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BUMED distributes MEDNEWS to Sailors and Marines, their families, civilian employees and retired Navy and Marine Corps families. Further distribution is highly encouraged.

Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC - Medical Corps (physician); DC - Dental Corps; NC - Nurse Corps; MSC - Medical Service Corps (clinicians, researchers and administrative managers). Hospital Corpsmen (HM) and Dental Technician (DT) designators are placed in front of their names.

Contents for this week's MEDNEWS:

- DoD winning 30-year war against drugs in the ranks
- TRICARE Prime clinics celebrate first year of success
- Chaplain corps launches high-tech ministry
- NH Bremerton wins at joint medical olympics
- Anesthesiologist is a wonder who puts Sailors under
- Great Lakes pulls together for disaster drill
- TRICARE question and answer
- Healthwatch: Nutritious reading benefits health

Stories

Headline: DoD winning 30-year war against drugs in the ranks
By Gerry J. Gilmore, American Forces Press Service

WASHINGTON - The incidence of service members using illegal drugs is at a 20-year low, evidence that DoD is winning the war against drug abuse in its ranks -- a conflict that began during the Vietnam War.

Ana Maria Salazar, Deputy Assistant Secretary of Defense for Drug Enforcement Policy and Support, noted that drug use by DoD personnel is down 90 percent compared to two decades ago. Just 2.6 percent of all service members reported drug use within the 30 days preceding their response to a 1998 survey, she said. More than 27 percent of respondents in a 1980 survey said they used illegal drugs in the preceding 30 days.

"Overall, the use of illegal drugs by service members is

down. Drug use has decreased every year since we started monitoring it in 1980," said Salazar.

She pointed to the effectiveness of substance abuse education programs, DoD's zero tolerance policy toward drug use, pre-employment and random drug testing.

"Drug use is incompatible with military service. Not tolerating drug use is the cornerstone of our deterrence program," she said. "Our system identifies users and ensures that they are punished. This approach deters drug use by other service members and promotes readiness."

Salazar noted that drug use "has always been a national security concern" that affects both the Defense Department and civilian society.

According to the Office of National Drug Control Policy, illegal drugs cost the national economy \$110 billion in expenses and lost revenue in 1995.

"Drug use by service members threatens their readiness to defend our nation," said Salazar. "Drug use by society in general damages our ability as a nation to have a strong economy with citizens who are focused on healthy lifestyles. This, in itself, threatens security."

Throughout "the post-Vietnam era" of the 1970s and early 1980s, many young Americans -- military and civilian -- experimented with illegal drugs like marijuana, LSD and cocaine. DoD had been conducting drug tests on service members since 1971, in large part to identify and treat heroin addicts who had picked up the habit in Southeast Asia, said Salazar.

"Drug users are more prone to have accidents, to use poor judgment and more likely to injure themselves and others," said Salazar. "DoD must encourage its members to become active in drug education and community support," said Salazar. Each of the services manages programs that distribute information on the dangers of drug use, she said.

-USN-

Headline: TRICARE Prime clinics celebrate first year of success
From Naval Medical Center Portsmouth

PORTSMOUTH, Va. - A single candle lighting their cake speaks not just of a time elapsed, but also of the colossal success of TRICARE Prime Clinics Boone, Oceana, Virginia Beach and Chesapeake, as the four clinics celebrate their first anniversary this month.

Naval Medical Center Portsmouth was given a challenge to convert contractor operated clinics to government-owned clinics. "To transfer care of more than 70,000 TRICARE Prime enrollees without interruption, match or exceed the enrollees satisfaction, and stay within current contract costs," were the guiding principles, according to Lt. Cmdr. Wilfredo Sarthou, project officer for the conversion.

Within one year, the TPCs increased enrollment, expanded hours and services, saved millions, and achieved unmatched patient satisfaction ratings. The driving force for these accomplishments has been the staff's strong commitment to go beyond customer satisfaction

The clinics provide a full range of primary care services to active duty family members, retirees and their family members. "We support the readiness mission through family readiness," said Lt. Cmdr. Phillip Jackson, TPC Chesapeake Officer in Charge. "In order for active duty members to be ready to deploy, they need to feel comfortable with whom they are entrusting their family health care," he said.

Among the services provided to 75,000 current TRICARE Prime enrollees at these facilities are general health screening, medical care for acute and chronic conditions, immunizations, optometry, laboratory, radiology and screening mammography. To increase access and convenience, the clinics offer extended hours.

The key to make all this happen is the staff. "We have an integrated staff. Whether nurse or physician, civil service or contractor, we work as team to provide the best care possible," said Cmdr. Peter Kopacz, Branch Clinic Oceana Officer in Charge.

Another important element for the TRICARE Prime Clinics' impressive performance is a swift and effective performance improvement program with a variety of feedback systems in place, which allows customers and staff to make suggestions and propose changes.

Another goal is to increase wellness and health promotion services offered at the clinics. Smoking cessation, weight management and other illness prevention programs are in the clinics leadership target.

Providing better care to more customers at a lesser cost is a dynamic mission that requires constant improvement to meet customers needs. These TRICARE Prime Clinics are committed to a road to success that is under permanent construction.

-USN-

Headline: Chaplain Corps launches high-tech ministry

From Bureau of Medicine and Surgery

WASHINGTON - ChaplainCare is a new Fleet-focused interactive and informational web site recently launched by the Navy Chaplain Corps.

As part of the Navy's Distance Support initiative, ChaplainCare provides round-the-clock access to chaplain support and religious information via an interactive web site www.ChaplainCare.navy.mil, a specially developed CD for afloat units, and the Navy's Integrated Call Center (1-877-41-TOUCH or OCONUS DSN: 510-42-TOUCH).

Designed to help Sailors, Marines and Coast Guard personnel in isolated locations find help online, ChaplainCare seeks to link service members with the right information, the right support, or the right person in a timely manner.

Check it out for yourself and discover a wealth of spiritual resources and religious information. You can also ask a question or request information via ChaplainCare@navy.mil and receive a response within 24 hours.

In case of a pastoral emergency there is a chaplain on-call via the Navy's Integrated Call Center. The site includes personal prayers, links to 18 daily devotions (including one in

Spanish), over 120 devotions written by Navy chaplains, information on 22 religions and links to over 400 other faith groups.

ChaplainCare cannot take the place of a person to person encounter with a real chaplain, but is meant to expand access to religious information and spiritual resources to Navy, Marine and Coast Guard personnel who do not have ready access to a chaplain.

-USN

Headline: NH Bremerton wins at Joint Medical Olympics

By JO2 Michael Howlett, Naval Hospital Bremerton

BREMERTON, Wa - The four military hospitals in the Puget Sound area recently competed in the second annual Joint Medical Olympics.

Teams from Naval Hospital Bremerton, Naval Hospital Oak Harbor, Madigan Army Medical Center, and McChord Air Force Base put their skills in field medicine to work during events designed to test their teamwork and knowledge.

Events came down to the wire as the two Navy teams were tied going into the last event. The spread came down to a difference of two points. Naval Hospital Bremerton repeated their victory and kept the trophy.

The main theme of the olympics was teamwork. However, the biggest display of teamwork came from the two Navy teams, that rooted for each other during the events. "To me, the best part of the whole thing was the teamwork we showed. We came out and did a great job, but overall it was great to see the Navy come out in the top two places," said Naval Hospital Bremerton Team Captain Hospital Corpsman 3rd Class (FMF) Patrick Link.

The challenges presented to the teams consisted of a CPR competition, combat casualty obstacle course, a written exam, tent building competition, chemical suit dressing race and patient carry relay race.

The obstacle course was the main draw of the competition. Five team members, selected from a hat at the start of the competition, carried a litter loaded with a 150 pound dummy through a mile of wooded hillside in a race against time. Along the course were mock patients with fake wounds. The teams had to stop and help each patient. The wounds varied from bullet wounds to broken bones, and included costume effects such as visible organs. Close by each "patient" was a judge who graded each team on its performance. Hits for mistakes added time to their final total in the race.

"It was not only a physical challenge, but a mental one," said Hospital Corpsman 2nd Class (FMF) Casey Jacobs, from the Naval Hospital Bremerton team.

Oak Harbor showed their prowess in the written exam, winning that competition.

The Air Force pulled out a victory in the relay race, but it wasn't enough to escape last place.

Next year's competition will be hosted by the Air Force and will take place at McChord Air Force Base, where the teams will once again go head to head for the yearlong title of top in

field medicine.

-USN-

Headline: Anesthesiologist is a wonder who puts Sailors under
By JO3 Paul Newell, USS George Washington

USS GEORGE WASHINGTON - Lt. David DiSanto, MC, USN, loves to relax. Whether he's out fishing the coastal waters of Pensacola or playing the piano, DiSanto has made a hobby out of mellowing, which is probably one of the reasons he chose to become an anesthesiologist.

Unfortunately, being an anesthesiologist isn't all that relaxing.

"You have to be very careful when administering anesthetics to a patient. You have to know what drugs to use and how much to use according to their weight," said DiSanto. "Then during surgery, you must stay alert and make sure your patient keeps breathing."

DiSanto has spent years studying and preparing for the job he performs aboard USS George Washington. But he will tell you too, that anesthesiology hasn't been a life-long dream. In fact, long before choosing scrubs and an operating room to conduct his business, DiSanto desperately wanted to fly jets.

"When I entered ROTC at the University of Rochester in 1987, I planned on being a Naval aviator," DiSanto said. "But when my eyesight went below 20/20, I had to find a new profession." So he chose medicine because he had done well in several biochemistry classes.

Determined to take advantage of his scholarship, DiSanto applied for and, after eight years of study, successfully became the first NROTC midshipman to graduate from medical school at the University of Rochester.

After graduation, he headed to the Dwight D. Eisenhower Army Medical Center in Ft. Gordon, Ga., for his internship as an anesthesiologist assistant. After his time there, he was sent to Bethesda, Md., for his three-year residency, an experience that left him working many 20-hour days.

But when he recently heard about the chance to come to a carrier for three months, he jumped at it.

As the GW's only anesthesiologist, his presence is requested anytime a medical situation warrants. But DiSanto isn't only knocking his patients out for a spell; his job encompasses other aspects of the medical world.

"I also work with those suffering from chronic pain. Sometimes I have to use chemicals to numb nerves with my patients, other times I use different drugs. I deal with a lot of lower back pain, post surgical and trauma patients. Whatever it takes to make them safely pain-free and able to get back to work is what I'm interested in providing for them," Disanto said.

With ambition to help his fellow shipmate, professional attitude and a zeal for life on the sea, DiSanto is a doctor Sailors want to keep around.

"The most important thing in being an anesthesiologist is knowing your limitations and to never be overconfident," Disanto

said. "If you stick to that philosophy, you'll be less inclined to get in trouble."

Sailors should be confident in DiSanto. Not only does the doctor have a spotless professional record, he really seems to care about those with which he works.

-USN-

Headline: Great Lakes pulls together for disaster drill

By Lt. Youssef H. Aboul-Enein, Naval Hospital Great Lakes

GREAT LAKES, Ill. - Twenty-nine students from Naval Hospital Corps School participated in a city-run disaster drill at the Great America Amusement Park, this month.

NTC Great Lakes is part of the Metropolitan Chicago Healthcare Council, a consortium of over 120 hospitals in the Chicago area. The city conducts between five and six disaster drills a year.

The Navy participants acted as casualties and by-standers providing a realistic exercise for Gurnee Fire Department and the five area hospitals participating in the disaster drill.

"This gives us an opportunity to pool our resources and expertise, particularly in preparing for a disaster or city-wide mass casualty," said CAPT Raymond Swisher, MSC, Naval Hospital Great Lakes Executive Officer.

"The scenario was a violent storm that collapsed buildings in the amusement park causing debris and injuries from flying objects," said HM2 (FMF) Howard Dillon, the liaison between the naval base and the community hospitals participating in the drill.

LCDR Gregory Jacobs, NC, and HM2(FMF) Jessie Cabeyadao from Naval Hospital Corps School provided on-scene leadership and accounting for all students that participated in the drill.

"The drill lasted from 7:00 to 11:00 a.m. and although a light rain descended on Great Lakes that day, it did not dampen the spirits of the Corps School students who volunteered to be moulaged casualties," Jacobs said.

"[The training] helps us put a pulse on what the Great Lakes fire, emergency and medical organizations are doing to respond to disasters," said CAPT Swisher.

-USN-

Headline: TRICARE question and answer

Question: I am participating in TRICARE Standard. Do I need to pay for my medical expenses up front, or will the doctor bill TRICARE directly?

Answer: Under TRICARE Standard, depending upon your provider, you may be required to pay for your share of the medical treatment up front. If you go to a doctor who participates in the Extra network, your out-of-pocket costs will be less than with Standard and you will not have to file claims.

-USN-

Headline: Healthwatch: Nutritious reading benefits health

From Bureau of Medicine and Surgery

One of the most important guidelines for wise food shopping

is to read food labels carefully. Most food labels provide a list of ingredients, and many also give additional information about the nutritional value of the contents.

The nutrients listed often include calories, fat, cholesterol, sodium, protein, other vitamins, and minerals. When looking at any list of ingredients, remember that ingredients are in order of their relative weight. The first ingredient is the one that makes up the greatest part of the product. The last ingredient on the list represents the smallest part of the product, and the others represent amounts in between.

Food labels provide nutritional information for a typical single serving rather than for the entire package or can, unless, of course, that makes up one serving. The serving size is an important measurement, since not all people eat the same amount of food at a single setting. Try to gauge how close the serving size is to your own eating habits in order to calculate how many nutrients you'll be receiving at each meal.

Food labels also show the amount of certain nutrients per serving along with the percent daily value (DV). The DV is based on a 2,000-calorie diet and is the percentage of each nutrient believed to meet the needs of the average person each day. For example, if a certain food provides 50 percent of the DV for vitamin C, one serving gives a person half the vitamin C needed per day.

The little bit of time you spend reading labels at the supermarket can yield tremendous health benefits. Compare brand names to find the highest nutritional value at a reasonable cost.

Finally, don't forget to read the lists of nutrients that may be posted near fresh, unprocessed foods, such as in the meat and produce sections of many supermarkets. You'll soon become an expert in filling your nutritional needs.

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Correction: Last week's MEDNEWS listed Capt. Gary W. Zuckerman, MSC, as Commanding Officer of Naval Hospital Bremerton. Capt. Zuckerman is the Commanding Officer at Naval Hospital Beaufort.

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Comments and ideas for MEDNEWS are welcome. Story Submissions are highly encouraged. Contact MEDNEWS editor, At email: mednews@us.med.navy.mil; telephone 202-762-3218, (dsn) 762, or fax 202-762-3224.

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